(1)	Street	Filing: Address:				
	•	State, Zip: Number:				
		senting Self				
	-	_	RIOR COURT OF ARIZ	ZONA COUNTY	OF COCONINO	
(2)	D			ŕ		
(2)	Petitio	ner:		(4) Case Numbe	r: DO	—
(3)	Respondent:		ORDER TO SHOW CAUSE			
	THE C	COURT ORDERS	:			
(5)	The fo	llowing individual	l shall appear before this	Court as follows: _		
	Date: _		Time:		Division:	
	The following individual shall appear before this Court as follows: Date: Time: Division: (all divisions are in the Coconino County Courthouse at 200 N. San Francisco St., Flagstaff, AZ) to show cause, if any, why the following relief should not be issued as requested in the Petition for Order to Show Cause:					
(6)	1. The court has been asked to issue the following temporary orders:					
						_ _
	2.	The court has been asked to issue any other orders it deems appropriate.				
	Time s	set aside: 30 minut	tes/ minutes			
		•	Petition for Order to Show lays before the hearing.	v Cause shall serve	e this Order to Show Cause on the	
	Requests for reasonable accommodation for persons with disabilities must be made to the division assigned to the case at least three judicial days before a scheduled court proceeding.					
	Date: _		Supe	rior Court Judge: _		
	NOTE TO RECIPIENT:					
	Sup	port Amount served of		st complete your own	ree with the Parent's Worksheet for Child Worksheet (available at the Self-Help	i
	2. If the Petition for Order to Show Cause concerns spousal maintenance, you must complete your own Spouse's Affidavit					

of Financial Information (available at the Self-Help Center) and serve it on the other party at least three days before the

hearing.